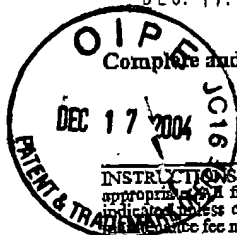


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NO. 2965 P. 3

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23914 7590 09/24/2004

STEPHEN B. DAVIS
BRISTOL-MYERS SQUIBB COMPANY
PATENT DEPARTMENT
P O BOX 4000
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Elliott Korsen (Depositor's name)
 (Signature)
 12/17/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/010,979	12/07/2001	David J. Carini	PH7262 NP	5592
TITLE OF INVENTION: SEMICARBAZIDES AND THEIR USES			12/20/2004 MWOLDGE2 00000070 193880	10010979

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE	DATE DUE
nonprovisional	NO	\$12307/1400	\$300	\$1630	12/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIFLE, BRUCK	1624	514-253010

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1 Elliott Korsen

2 Rena Patel

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Bristol Myers Squibb Pharma Company
Reel 012450 Frame 0454

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Princeton, NJ U.S.A

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Elliott Korsen

Date 12/17/04

Typed or printed name

Elliott Korsen

Registration No. 32,705

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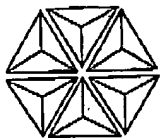
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BMS PATENT DEPT

NO. 29654 P. 13



Bristol-Myers Squibb Company
Patent Department

DATE: December 17, 2004

FACSIMILE TRANSMITTAL SHEET

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TO: USPTO - Issue Fee Branch
FAX NO.: 1-703-746-4000
FROM: Elliott Korsen
TELEPHONE NO.: (609) 252-4741
FACSIMILE NO.: (609) 252-4526
RE: U.S. Application Serial No.: 10/010,979
Attorney Docket No.: PH7262 NP
Number of Pages: 3 (including cover sheet)

CERTIFICATE OF TRANSMISSION VIA FACSIMILE

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